## **BUTTS COUNTY SCHOOLS**

Physicians Authorization To Treat Employee

## **WORKER'S COMPENSATION**

Employee Name:
Date of Injury:
Type of Injury:
Authorization: Title:
ALL STATEMENTS MUST BE SENT DIRECTLY TO:
Charles Taylor
P.O. Box 436499
Louisville KY 40253-6499
678-376-0003
888-245-4722 Toll Free
502-489-6430 FAX
IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT:
Janet Dahlin
Workers' Compensation Claims Contact
Butts County Schools
181 N. Mulberry St.

Jackson, GA 30233 Phone 770-504-2300 ext. 1110 FAX: 770-504-2305 10/20/2022